



Mass Poisoning Event cover-up: using skewed stats to hide the truth

Description

UK: Government is an attractive target for criminals by virtue of the opportunities it presents, once in their hands, for theft, extortion, “protection” rackets, murder and myriad other fun criminal pastimes.

It is not unusual for a government to lie to suit an agenda or cover its ass, once it has succumbed to infiltration by criminal factions.

One method of lying is to issue deliberately falsified or skewed statistics.

The jiggery-pokery with statistics when done with skilled mastery of the art of deceit and aided and abetted by a corporate media that turns a blind eye, can be very hard for the layman to see through, such is the smokescreen of complexity behind which the deceit is concealed.

The following featured article from Frontline News gives us a helpful analysis of one of the methods of doctoring the stats. That method, in a nutshell is to blur definitions. In this instance, the blurring is between “vaccinated” and “injected”, a slight-of-hand by which thousands of people who got sick or died immediately after they were given a Covid injection, were counted as “unvaccinated”.

The deceit is egregiously cynical and downright nasty, as you would expect of a clique that has infiltrated and subverted our government and launched a covert war on the country’s citizens and then having orchestrated a mass poisoning event, seeks to evade comeuppance for its crimes.

We are indebted to those who keep the flag of truth flying. Thanks to them the day is coming when the thousands injured and murdered will get justice.

Injected but ‘unvaccinated’ – Distortion that covered up trail of destruction

Frontline News

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SOURCE: [Frontline News](#)

Data from Swedish Public Health reveals magnitude of problem

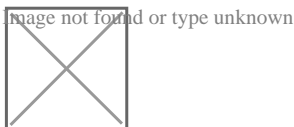
It is common knowledge that the COVID vaccines take about two weeks to provide the protection claimed by their manufacturer. For Pfizer and Moderna, that would be two weeks after the second dose, and for Johnson & Johnson, two weeks after the single dose.

That is why people are considered to be “vaccinated” only after 14 days have passed from the latest injection. Prior to that, there is no claim of “full protection.” Therefore, the vaccine’s protection is measured only after 14 days have elapsed – “partially vaccinated” in the case of the first injection, and “fully vaccinated” in the case of the final injection.

But what about negative events that occur between the first injection and being “partially vaccinated” weeks later? During this period the person is still considered “unvaccinated” despite having already received an injection up to 14 days prior. As a result, when a person contracts COVID, gets hospitalized, or dies during this 14 day period, much of the medical research, government records and public dashboards, lists the person in the “unvaccinated” category.

Here is a typical [study](#) by the CDC listing various outcomes by vaccination status. Unless one looks carefully at the small print at the bottom, one would assume that “unvaccinated” means those who received no injections when in fact, as stated at the bottom, “unvaccinated” means they either received no injections or received the first dose within the last 14 days.

So the 176 “unvaccinated” people who died, and the 2,355 “unvaccinated” people who were hospitalized may have actually been injected with a COVID vaccine within the last 14 days.



Source: <https://www.cdc.gov/mmwr/volumes/70/wr/pdfs/mm7034e5-H.pdf>

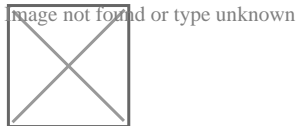
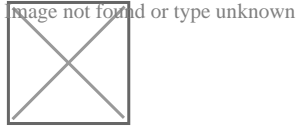
The same is true in the [UK](#). See page 44 for definitions of the unvaccinated showing that it includes those who have been injected with a “first dose of vaccine received within 14 days prior to the positive COVID-19 test” within its data on hospitalizations.

Increased COVID infections soon after vaccination

Categorizing injected individuals as “unvaccinated” skews the data in favor of vaccine efficacy. Here’s why. It is well [documented](#) that in many cases those who have been injected (but are not yet

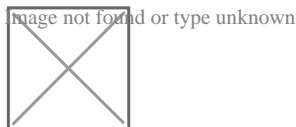
considered “vaccinated”) have a higher rate of COVID infection than those who have never been injected.

For example, Pfizer’s own FDA application for ages 6 months – 4 years shows that between doses one and two the Vaccine Efficacy is -29% for babies, and -32% for toddlers.



Source: <https://www.fda.gov/media/159195/download> (page 39)

Another example, we see in this [study](#) (prior to Omicron) that children aged 12-15 have overall negative vaccine effectiveness until the ninth day after injection:



Source: <https://www.medrxiv.org/content/10.1101/2021.12.10.21267408v1.full.pdf>

However, if no distinction is made between ‘injected’ and ‘vaccinated’ these children would be considered unvaccinated, since it’s less than 14 days from the injection thus making the vaccine look more effective at preventing infections than it really is.

Since it’s now widely understood that the vaccines don’t prevent infections, and in many cases [actually increase them](#), this point is still important in correcting the false historical record of what these vaccines did.

Beyond COVID infections – distortion of hospitalization and death data

In addition to making the vaccines look more efficacious than they are, miscategorizing injected as “unvaccinated” produced misleading data regarding hospitalizations and deaths. Those who got infected and were hospitalized, or died after being injected, were often not properly included in the data since they were considered “unvaccinated”.

A study from December 2021 looked into this improper categorization, as well as other statistical problems with COVID vaccination data **in the UK**. The authors wrote in the introduction that “Whatever the explanations for the observed data [on vaccination effectiveness], it is clear that it is both unreliable and misleading.”

The study asserted that “the most likely explanations for the observed anomalies are a combination of systemic miscategorisation of deaths between the different categories of unvaccinated and vaccinated.”

The blurring of definitions which leads to a distorted reality is reminiscent of how the health authorities counted “[COVID deaths](#)”. In many instances, COVID deaths included those who died sans symptoms, but just on the basis of a positive PCR test. In other cases no COVID test was done. Nevertheless, the death was listed as a COVID death simply on the suspicion that it may have been COVID related.

The distorted data created an impression that the vaccine was safer and more effective than it was, which convinced many people to take it, and may have led to serious injury and death.

Swedish data provides clarity

Until recently there was no way of knowing how many of the injected were counted as “unvaccinated”. The Swedish Public Health Agency has now released more detailed data in response to an inquiry from the Lakaruppropet publication.

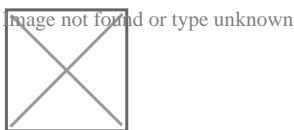
The more precise categorization of COVID deaths by vaccination status for all of 2021 was published by Lakaruppropet. It shows that there were 666 deaths (out of 2,895) who were injected but still considered “unvaccinated” an astonishing 23%. In this case, the miscategorizing of the injected as “unvaccinated” was so significant that it flipped the entire picture of the vaccine’s effectiveness in preventing COVID deaths completely upside down.

Dr. Jessica Rose, a Computational Biologist, examined the newly released data from the Swedish Public Health. She matched the numbers with the vaccination rate for each month in Sweden to normalize the COVID deaths (deaths per capita vaccinated versus unvaccinated) to evaluate the effectiveness of the vaccination.

In her report, she described the graph showing her conclusions as being the “most important plot I have made so far in all this freedom fighting.”

The first graph shows the normalized number of deaths per million according to vaccination status where the “injected” and the “partially vaccinated” are included as “unvaccinated”.

Clearly the unvaccinated were dying at a dramatically higher rate than the vaccinated.



Source: <https://jessicar.substack.com/p/demystifying-the-swedish-data?s=w>

The second graph shows the normalized number of deaths per million according to vaccination status. But instead of the ambiguous terms “vaccinated” and “unvaccinated”, this graph compares “injected” versus “uninjected”.

The bottom line is striking. The “injected” died from COVID at a significantly higher rate than the “uninjected”, the exact opposite of what the injections were supposed to do.

But in order to accurately determine the vaccine’s effectiveness at preventing death, we would need to

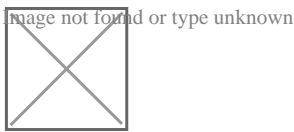
break the data down by risk category – but that is another topic.

Beyond COVID deaths – adverse events

In addition to the COVID deaths that occurred in the injected but “unvaccinated” there are thousands of adverse events that often strike precisely at that time.

According to reports made to the U.S. Government’s Vaccine Adverse Event Reporting System (VAERS) a large portion of suspected adverse events occur in the 14 days after vaccination, or to be more accurate, the first 14 days after injection.

For example, there were about 12,000 deaths which occurred within ten days of the first injection – out of approximately 28,000 deaths that were associated with COVID vaccines.



Source: <https://openvaers.com/covid-data>

Depending on the data sets, many of these deaths, additional hospitalizations, and permanent disabilities would be excluded from the “vaccinated” statistics precisely *because* they occurred so soon after the injection. If, however, these events were categorized as occurring following injection, a completely different story emerges.

As Tryon Edwards once said, “Most controversies would soon be ended, if those engaged in them would first accurately define their terms, and then adhere to their definitions.”

by Steve Cook

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